The fuel activity information contained in this form must be filed electronically. To view the information you must provide, go to the next page.

## *Somv*

## VIRGINIA FUELS TAX SUPPLIER'S SCHEDULE OF DISBURSEMENTS

Department of Motor Vehicles Tax Services P.O. Box 27422 Richmond, Virginia 23269-7422

Read the filing information and instructions on the back.

Schedule Number

SUPPLIER INFORMA	TION		PL	EASE PRINT IN	INK OR TYPE						
Name					FEIN/SSN	N			Repo	rt Month/Year	
PRODUCT INFORMA	TION Check application	able box.	(Complete sepa	arate schedules	for each product type di	isbursed.)	MOD	E OF TRANS	PORTATION	CODES	
☐ 150-#1 Fuel Oil ☐ 122-Blending Components		123-Fuel Alcoho	ol 🗌 142-Ke	142-Kerosene		J - Truck PL - Pipeline B - Barge			<b>B</b> - Barge		
☐ 125-Aviation Gasoline	228-Diesel-Dyed		124-Gasohol	☐ 175-R	175-Residual Fuel Oils			R - Rail ST - Stationary Transfer			
☐ 130-Aviation Jet Fuel ☐ 160-Diesel-Undyed		☐ 065-Gasoline	☐ Other	Product Code  Other		S - Ship BA - Book Adjustment			ent		
					Product Type						
PRODUCT DISBURSI	EMENT INFORMAT	ION					_				
1 Carrier's Name	2 Carrier's FEIN/SSN	3 Mode	Poir Origin	4 nt of Destination	6 Purchaser's Name	7 Purchase FEIN/SS		8 Date Shipped	9 Document Number	12 Billed	

ADDITIONAL LINES ON BACK

TOTAL (this page only)
GRAND TOTAL (all pages)

## VIRGINIA FUELS TAX SUPPLIER'S SCHEDULE OF DISBURSEMENTS

			<u> </u>	OGIILDOL	L OI DIODOINGLIN	<u> </u>			
1 Carrier's	2 Carrier's	3 Mode	Poi	4 nt of	6 Purchaser's	7 Purchaser's		9 Document	12 Billed
Name	FEIN/SSN		Origin	Destination	Name	FEIN/SSN	Shipped	Number	Gallons
			<u></u>	200					
							TOTAL (this page	only)	

## **INSTRUCTIONS**

This schedule provides detail in support of the amount(s) shown as disbursements on your monthly Virginia fuels tax report.

You may submit a schedule summarizing your disbursements which must be formatted the same as the Supplier's Schedule of Disbursements. Complete separate summary schedules for each product type and group purchasers together. If you choose to submit summary schedules, you must still submit the schedules of individual disbursements.

SCHEDULE NUMBER Enter the schedule number for the product activity you are reporting. (See Part A of the monthly report for required schedules.)
NAME Enter the name of the supplier as shown on your monthly Virginia fuels tax report.
FEIN/SSN Enter the supplier's FEIN or SSN as shown on your monthly Virginia fuels tax report.
REPORT MONTH/YEAR Enter the month and year for which you are reporting.
PRODUCT INFORMATION Check the applicable box for the product type accounted for on this schedule.
CARRIER'S NAME Enter the name of the company that transported the product.
CARRIER'S FEIN/SSN Enter the FEIN or SSN of the company that transported the product.
MODE Enter the code for the mode of transport used to move the product from the terminal. (See the Mode Of Transportation Codes chart on the front.)
POINT OF ORIGIN Enter the IRS Terminal Control Number if the product was disbursed from a terminal. Otherwise enter the city and state where the disbursement occurred.
POINT OF DESTINATION Enter the IRS Terminal Control Number if the product was received into a terminal. Otherwise, enter the city and state where the product was delivered.
PURCHASER'S NAME Enter the name of the company that bought the product.
PURCHASER'S FEIN/SSN Enter the FEIN or SSN of the company that bought the product.
DATE SHIPPED Enter the date (month, day, year) the product was shipped.
DOCUMENT NUMBER Enter the terminal manifest number, pipeline/barge ticket number, or bulk plant withdrawal invoice number.
BILLED GALLONS Enter the total number of gallons billed.
TOTAL (this page only) Enter the sum of these columns for this page of the report.
GRAND TOTAL (all pages) Enter the sum of these columns for all pages of this report.